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33375 7590 05/04/2004

**THOMPSON HINE LLP  
2000 COURTHOUSE PLAZA N.E.  
10 WEST SECOND STREET  
DAYTON, OH 45402-1758**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<i>Collette Crawford</i>	(Depositor's name)
<i>Collette Crawford</i>	(Signature)
7-16-04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/772,708	01/30/2001	Thomas H. North	483471-003	7669

TITLE OF INVENTION: WELDING ELECTRODE AND METHOD FOR REDUCING MANGANESE IN FUME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ELVE, MARIA ALEXANDRA	1725	219-137000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 Thompson Hine LLP  
 2 P.O. Box 8801  
 3 Dayton OH 45401-8801

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1. Illinois Tool Works Inc. Glenview, Illinois  
 2. University of Toronto Canada

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

- Issue Fee  
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 Advance Order - # of Copies 10

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0809 (enclose an extra copy of this form).

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(Authorized Signature)		(Date)
<i>[Signature]</i> 7-16-04		
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<p>This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.</p> <p>Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.</p>		
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07/20/2004 MMEKONE1 00000011 09772708

01 FC:1501	1330.00	OP
02 FC:1504	300.00	OP
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